

# When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**  
 PERMITTEE NAME: Florida Mining Corporation  
 MAILING ADDRESS: 7000 State Road 50  
 Webster, FL 33597

FACILITY: Mazak Linerock Mine  
 LOCATION: 7000 State Road 50  
 Webster, FL 33597

COUNTY: Sumter

PERMIT NUMBER: FL0322890  
 LIMIT: Final  
 CLASS SIZE: Minor  
 MONITORING GROUP NUMBER: D-001  
 MONITORING GROUP DESC: S-1  
 NO DISCHARGE FROM SITE: ☒ X  
 MONITORING PERIOD From: 2/01/2006 To: 2/28/2006

Parameter	Sample	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Measurement					0		
PARM Code 50050 1 Mon. Site No. FLW-1	Permit Requirement	3.7 (Mo Avg)	MGD			0	Continuous	Calculated
pH	Sample Measurement					0		
PARM Code 00400 1 Mon. Site No. EFF-1	Permit Requirement			6.0 (Min)	8.5 (Max)	0	Monthly	Grab
Turbidity	Sample Measurement					0		
PARM Code 00070 1 Mon. Site No. EFF-1	Permit Requirement				29 (Max)	0	Monthly	Grab
Specific Conductance	Sample Measurement					0		
PARM Code 00095 1 Mon. Site No. EFF-1	Permit Requirement				1275 (Max)	0	Monthly	Grab
Chloride (as Cl)	Sample Measurement					0		
PARM Code 00940 1 Mon. Site No. EFF-1	Permit Requirement				Report (Max)	0	Monthly	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Patricia Snowdon, Sr. Environmental Scientist			

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): (800) 643-2973 2005/03/28

FACILITY NAME: Mazak Limerock Mine

**DISCHARGE MONITORING REPORT - PART A (Continued)**

PERMIT NUMBER: FL0322890 MONITORING GROUP NUMBER: D-001  
 MONITORING PERIOD From: 2/01/2006 To: 2/28/2006

Parameter	Sample Measurement	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Fluoride, Total (as F)	Sample Measurement					0		
PARM Code 00951 1 Mon. Site No. EFF-1	Permit Requirement			10.0 (Max.)	MG/L	0	Monthly	Grab
Sulfate, Total	Sample Measurement					0		
PARM Code 00945 1 Mon. Site No. EFF-1	Permit Requirement			Report (Max.)	MG/L	0	Monthly	Grab
Sodium, Total Recoverable	Sample Measurement					0		
PARM Code 00923 1 Mon. Site No. EFF-1	Permit Requirement			Report (Max.)	MG/L	0	Monthly	Grab
Aluminum, Total Recoverable	Sample Measurement					0		
PARM Code 01104 1 Mon. Site No. EFF-1	Permit Requirement			Report (Max.)	MG/L	0	Monthly	Grab
Lead, Total Recoverable (effluent)	Sample Measurement					0		
PARM Code 01114 1 Mon. Site No. EFF-1	Permit Requirement			Report (Max.)	UG/L	0	Monthly	Grab
Lead, Total Recoverable (calculated)	Sample Measurement					0		
PARM Code 01114 P Mon. Site No. EFF-1	Permit Requirement			Report (Max.)	UG/L	0	Monthly	Grab
Lead, Total Recoverable (effluent minus the calculated limit)	Sample Measurement					0		
PARM Code 01114 Q Mon. Site No. EFF-1	Permit Requirement			0.00 (Max.)	UG/L	0	Monthly	Grab
Hardness, Total (as CaCO3)	Sample Measurement					0		
PARM Code 00900 1 Mon. Site No. EFF-1	Permit Requirement			Report (Max.)	MG/L	0	Monthly	Grab
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							



**DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A**

**When Completed mail this report to:** Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

**PERMITTEE NAME:** Florida Mining Corporation  
**MAILING ADDRESS:** 7000 State Road 50  
 Webster, FL 33597

**PERMIT NUMBER:** FL0322890

**LIMIT:** Final  
**CLASS SIZE:** Minor

**REPORT GROUP:** Toxicity  
 Industrial

**FACILITY:** Mazak Limerock Mine  
**LOCATION:** 7000 State Road 50  
 Webster, FL 33597

**MONITORING GROUP NUMBER:** D-002  
**MONITORING GROUP DESC:** S-4

**COUNTY:** Sumter


**NO DISCHARGE FROM SITE:** ☐

**MONITORING PERIOD** From: 2/01/2006 To: 2/28/2006

Parameter	Quantity or Loading	Units	Quality or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
LC50 STATRE 96HOUR ACUTE Ceriodaphnia dubia (Routine) PARM Code TAN3B P Mon. Site No.	Sample Measurement		NODI=9		PER-CENT	0	1/Year	1 grab/ 24 hour
LC50 STATRE 96HOUR ACUTE Ceriodaphnia dubia (Additional) PARM Code TAN3B Q Mon. Site No.	Permit Requirement		100 (Min.)		PER-CENT	0	1/Year	1 grab/ 24 hour
LC50 STATRE 96HOUR ACUTE Cypripella leedsii (Routine) PARM Code TAN6H P Mon. Site No.	Sample Measurement		NODI=9		PER-CENT	0	As needed	As required by the permit
LC50 STATRE 96HOUR ACUTE Cypripella leedsii (Additional) PARM Code TAN6H Q Mon. Site No.	Permit Requirement		100 (Min.)		PER-CENT	0	1/Year	1 grab/ 24 hour
	Sample Measurement				PER-CENT	0	As needed	As required by the permit
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

\*IF A SECOND DEFINITIVE TEST IS REQUIRED, ENTER THE RESULT IN AN EMPTY ROW.  
 \*\*ENTER NODI=9 IN THE RESULTS COLUMN IF NO DISCHARGE OCCURRED DURING THIS REPORTING PERIOD.  
 ENTER NODI=9 IN THE RESULTS COLUMN IF NO DEFINITIVE TESTS ARE REQUIRED.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Patricia Snowdon, Sr. Environmental Scientist		(800) 643-2973	2005/03/28

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Florida Mining Corporation  
MAILING ADDRESS: 7000 State Road 50  
Webster, FL 33597

PERMIT NUMBER: FL0322890

FACILITY: Mazak Limerock Mine  
LOCATION: 7000 State Road 50  
Webster, FL 33597

LIMIT: Final  
CLASS SIZE: Minor

REPORT: Monthly  
GROUP: Industrial

MONITORING GROUP NUMBER: D-002  
MONITORING GROUP DESC: S-4 (Tributary ditch)

COUNTY: Sumter

NO DISCHARGE FROM SITE: ☐

MONITORING PERIOD From: 2/01/2006 To: 2/28/2006

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	MGD			0	Continuous	Calculated
PARM Code 50050 1	Permit Requirement	MGD			0	Continuous	Calculated
Mon. Site No. FLW-2	3.7 (Mo Avg)	Report (Max)					
pH	Sample Measurement		8.2	8.2	0	Monthly	Grab
PARM Code 00400 1	Permit Requirement		6.0 (Min)	8.5 (Max)	0	Monthly	Grab
Mon. Site No. EFF-2	Sample Measurement			6.8	0	Monthly	Grab
Turbidity	Permit Requirement			29 (Max)	0	Monthly	Grab
PARM Code 00070 1	Sample Measurement			372	0	Monthly	Grab
Mon. Site No. EFF-2	Permit Requirement			1275 (Max)	0	Monthly	Grab
Specific Conductance	Sample Measurement			16	0	Monthly	Grab
PARM Code 00095 1	Permit Requirement				0	Monthly	Grab
Mon. Site No. EFF-2	Sample Measurement				0	Monthly	Grab
Chloride (as Cl)	Permit Requirement				0	Monthly	Grab
PARM Code 00940 1	Sample Measurement				0	Monthly	Grab
Mon. Site No. EFF-2	Permit Requirement				0	Monthly	Grab

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE NO

DATE (YY/MM/DD)

Patricia Snowdon, Sr. Environmental Scientist

(800) 643-2973 2005/03/28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):



## FACILITY NAME:

Mazak Limerock Mine

PERMIT NUMBER: FL0322890

MONITORING GROUP NUMBER: D-002

MONITORING PERIOD	From	To
1	1990	1991
2	1992	1993
3	1994	1995
4	1996	1997
5	1998	1999
6	2000	2001
7	2002	2003
8	2004	2005
9	2006	2007
10	2008	2009
11	2010	2011
12	2012	2013
13	2014	2015
14	2016	2017
15	2018	2019
16	2020	2021
17	2022	2023
18	2024	2025
19	2026	2027
20	2028	2029
21	2030	2031
22	2032	2033
23	2034	2035
24	2036	2037
25	2038	2039
26	2040	2041
27	2042	2043
28	2044	2045
29	2046	2047
30	2048	2049
31	2050	2051
32	2052	2053
33	2054	2055
34	2056	2057
35	2058	2059
36	2060	2061
37	2062	2063
38	2064	2065
39	2066	2067
40	2068	2069
41	2070	2071
42	2072	2073
43	2074	2075
44	2076	2077
45	2078	2079
46	2080	2081
47	2082	2083
48	2084	2085
49	2086	2087
50	2088	2089
51	2090	2091
52	2092	2093
53	2094	2095
54	2096	2097
55	2098	2099
56	2100	2101
57	2102	2103
58	2104	2105
59	2106	2107
60	2108	2109
61	2110	2111
62	2112	2113
63	2114	2115
64	2116	2117
65	2118	2119
66	2120	2121
67	2122	2123
68	2124	2125
69	2126	2127
70	2128	2129
71	2130	2131
72	2132	2133
73	2134	2135
74	2136	2137
75	2138	2139
76	2140	2141
77	2142	2143
78	2144	2145
79	2146	2147
80	2148	2149
81	2150	2151
82	2152	2153
83	2154	2155
84	2156	2157
85	2158	2159
86	2160	2161
87	2162	2163
88	2164	2165
89	2166	2167
90	2168	2169
91	2170	2171
92	2172	2173
93	2174	2175
94	2176	2177
95	2178	2179
96	2180	2181
97	2182	2183
98	2184	2185
99	2186	2187
100	2188	2189
101	2190	2191
102	2192	2193
103	2194	2195
104	2196	2197
105	2198	2199
106	2200	2201
107	2202	2203
108	2204	2205
109	2206	2207
110	2208	2209
111	2210	2211
112	2212	2213
113	2214	2215
114	2216	2217
115	2218	2219
116	222	

2/01/2006 To 2/28/2006

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Fluoride, Total (as F)	Sample Measurement		0.25	Mg/L	0	Monthly	Grab
PARM Code 00951 1	Permit Requirement		10.0 (Max.)	Mg/L	0	Monthly	Grab
Mon. Site No. EFF-2 Sulfate, Total	Sample Measurement		5.4	Mg/L	0	Monthly	Grab
PARM Code 00945 1	Permit Requirement		Report (Max.)	Mg/L	0	Monthly	Grab
Mon. Site No. EFF-2 Sodium, Total Recoverable	Sample Measurement		11.0	Mg/L	0	Monthly	Grab
PARM Code 00923 1	Permit Requirement		Report (Max.)	Mg/L	0	Monthly	Grab
Mon. Site No. EFF-2 Aluminum, Total Recoverable	Sample Measurement		0.078	Mg/L	0	Monthly	Grab
PARM Code 01104 1	Permit Requirement		Report (Max.)	Mg/L	0	Monthly	Grab
Mon. Site No. EFF-2 Lead, Total Recoverable (effluent)	Sample Measurement		<5.0	UG/L	0	Monthly	Grab
PARM Code 01114 1	Permit Requirement		Report (Max.)	UG/L	0	Monthly	Grab
Mon. Site No. EFF-2 Lead, Total Recoverable (calculated)	Sample Measurement		8.18	UG/L	0	Monthly	Grab
PARM Code 01114 P	Permit Requirement		Report (Max.)	UG/L	0	Monthly	Grab
Mon. Site No. EFF-2 Lead, Total Recoverable (effluent minus the calculated)	Sample Measurement		-3.18	UG/L	0	Monthly	Grab
PARM Code 01114 Q	Permit Requirement		0.00 (Max.)	UG/L	0	Monthly	Grab
Mon. Site No. EFF-2 Hardness, Total (as CaCO3)	Sample Measurement		210	Mg/L	0	Monthly	Grab
PARM Code 00900 1	Permit Requirement		Report (Max.)	Mg/L	0	Monthly	Grab
Mon. Site No. EFF-2	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						

# INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

The DMR consists of four parts--A, B, C, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part C is only applicable for domestic wastewater facilities with limited wet weather discharges permitted under Chapter 62-610.860, F.A.C. Part D is used for reporting ground water monitoring well data.

Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be typed or printed in ink.

In addition to filling in numerical results on various parts of the DMR, the following codes should be used and an explanation provided where appropriate. Note: Codes used by the lab for raw data may be different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood disaster.
IFS	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD	No discharge from/to site.
OPS	Operations were shutdown so no sample could be taken.
OTH	Other. Please enter an explanation of why monitoring data were not available.
SEF	Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used.

1. Results greater than or equal to the PQL shall be reported as the measured quantity.
2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one half the MDL or half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

## PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, quarterly, etc.) Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following blanks in the header should be completed by the permittee or authorized representative.

**No Discharge From Site:** Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number. If there was no discharge of effluent for a particular outfall, reuse, or land application system and the DMR monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.

**Monitoring Period:** Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

**Sample Measurement:** Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.).

**No. Ex.:** Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter. If none, enter zero.

**Frequency of Analysis:** The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.

**Signature:** The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area. This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

**Comment and Explanation of Any Violations:** Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.



## PART B - DAILY SAMPLE RESULTS

**Month/Year:** Enter the month and year during which the data on this report were collected and analyzed.

**Three-month Average Daily Flow:** Calculate and enter the three-month average daily flow to the treatment facility.

**(TMAD/F Permitted Capacity) x 100:** Divide the three-month average daily flow by the permitted capacity of the treatment facility, multiply by 100, and enter this value.

**Daily Monitoring Results:** Record the results of daily monitoring for the parameters required to be sampled by your permit. Record the data in the units indicated.

**Plant Staffing:** List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

**Type of Effluent Disposal or Reclaimed Water Reuse:** Enter the type of effluent disposal or reclaimed water reuse (e.g. surface water discharge, ocean outfall, slow rate land application-public access, slow rate land application-limited wet weather discharge activated). If this plant does not have a limited wet weather discharge permitted under the provision of Rule 62-610.860, F.A.C., check 'Not Applicable.' If the plant activated the wet weather discharge during the reporting month, check 'Yes' and attach PART C - LIMITED WET WEATHER DISCHARGE.

## PART C - LIMITED WET WEATHER DISCHARGE

This part is to be completed and submitted each month reclaimed water or effluent is discharged by a limited wet weather discharge permitted under Rule 62-610.860, F.A.C. For months with no discharge, Part C need not be submitted. All information is to be provided for each day on which the limited wet weather discharge was activated.

**Month/Year:** Enter the month and year during which the data on this report were collected and analyzed.

**Rainfall Information:** Enter the name and location of the rainfall gauging station, the source of climatological (normal rainfall) data, the cumulative rainfall for the average rainfall year, and the cumulative rainfall to date for this calendar year. The cumulative rainfall for the average rainfall year is the amount of rain, in inches, which falls during an average rainfall year from January through the month for which this part contains data. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

**Date:** Enter the date on which the discharge occurred.

**Duration of Discharge:** Enter the number of hours, to the nearest 0.1 of an hour (0.1 hr. = 6 min.) during each day of discharge that reclaimed water was actually discharged to surface waters.

**Gallons Discharged:** Enter the quantity in millions of gallons of reclaimed water discharged during the period shown in duration of discharge. Show the units as millions of gallons (mg), accurate to the nearest 0.01.

**Average Discharge Flow Rate:** Divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

**Average Upstream Flow Rate:** Enter the average flow rate in the receiving stream upstream from the point of discharge for the period shown in duration of discharge. The average flow rate can be calculated based on two measurements, one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

**Stream Dilution Factor:** Enter the actual stream dilution ratio accurate to the nearest 0.1. To calculate the factor, divide the average upstream flow rate by the average discharge flow rate.

**CBOD<sub>5</sub>:** Enter the average CBOD<sub>5</sub> of the reclaimed water discharged during the period shown in duration of discharge.

**TKN:** Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

**Total P:** Enter the cumulative number of days since January 1 of the current year during which the limited wet weather discharge was activated divided by the total number of days since January 1 of the current year multiplied by 100%.

**Reason for Discharge:** Provide a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

**PART D - GROUND WATER MONITORING REPORT**

**Monitoring Period:** Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

**Date Sample Obtained:** Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

**Sampling Methods:** Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)

**Samples Filtered:** Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

**Preservatives Added:** State what preservatives were added to the sample.

**Analysis Method:** Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.

**Detection Limits/Units:** Record the results of the analysis. If the result was below the minimum detection limit, indicate that. Enter the units associated with the results of the analysis.

**Comments and Explanations:** Use this space to make any comments on or explanations of results which are unexpected. If more space is needed, reference all attachments in this area.